

INDIANA BAIL AGENT APPLICATION

Please type or use clearly legible printed writing. Illegible applications will be returned. You must answer all questions fully and the affidavit must be properly notarized. Failure to follow instructions will result in the application's return to applicant. Please attach a sheet for additional information when necessary.

All applications must include:

- (1) A completed application including **Form 3a**, signed and completed by the surety company.
- (2) A recent digital full face photograph and your signature on the specimen sheet so we can include on your license. If you prefer, pictures can be taken and a license issued in our office, **but only by appointment.**
- (3) A Certified fingerprint card from local law enforcement or a receipt from L-1 Identity Solutions showing that you have been fingerprinted.
- (4) Recent Credit Bureau Report (can be obtained free) at: www.annualcreditreport.com
- (5) Criminal History Check completed by Indiana State Police.
- (6) Photo copies of other Professional Licenses that you hold.
- (7) Application fee of \$650.00 (check or money order).
- (8) Completion Certificate for twelve (12) credit hours of Pre-Licensing Education.
- (9) Score report from testing center.

We Do Not Accept Cash or Credit Cards

There is a One Hundred Dollar (\$100.00) examination fee, to be paid at the time of registration on Website. Do not send this fee with your application. The examination is given by a vendor. See enclosed instructions on how to register for your test. Please note that incorrect or misleading information on this application may result in a denial or other administrative action! Please call this office at 317-232-5249 if you have any question regarding this application. Be sure to visit our website www.in.gov/idoi for forms, updates and additional information.

Mail to: Indiana Department of Insurance, Bail Bond Division, 311 West Washington Street, Suite 103, Indianapolis, IN 46204

STATE OF INDIANA BAIL AGENT APPLICATION

LEGAL NAME OF APPLICANT:
HOME ADDRESS:
CITY/COUNTY/ZIP:
LENGTH OF TIME AT THAT ADDRESS:
PREVIOUS ADDRESS (ES) FOR PAST 5 YEARS:
PROPOSED BUSINESS ADDRESS:
HOME PHONE:BUSINESS PHONE:
EMAIL ADDRESS:
IF YOU WILL WORK FOR OR REPORT TO SOMEONE ELSE, GIVE THEIR
NAME AND, IF APPLICABLE, THE STATE AGENT'S NAME:
NAME OF COMPANY YOU WILL REPRESENT:
PRINCIPLE ADDRESS WHERE YOU INTEND TO CONDUCT BUSINESS: (This is where you will be audited if licensed)
LENGTH OF INDIANA RESIDENCY:
CURRENT OCCUPATION:
WILL YOU CONTINUE THIS JOB UPON LICENSURE? YES NO
SOCIAL SECURITY NUMBER:
DATE OF BIRTH: EYE COLOR: HEIGHT:
HAIR COLOR:WEIGHT:

ANSWER THE FOLLOWING QUESTIONS FULLY

1. Are there any complaints or charges against you currently pending before any public authority, including a law enforcement agency and Bureau of Motor Vehicles? YESNO
2. Has a disciplinary action been taken against you by any public authority (law enforcement agency, Bureau of Motor Vehicles, etc.)? YESNO
3. Have you ever been convicted of a Felony? YESNO
4. Have you been convicted of a Misdemeanor involving dishonesty, violence, or a deadly weapon? YESNO
5. Are you a jailer, law enforcement officer, or do you have any custody or control over any prisoners? YESNO
6. Have you ever previously held an insurance or bail agent's license in this or another state? YESNO
7. If you answered yes to item # 6, was that license ever suspended or revoked? YESNO
8. If you are a licensed all lines fire and casualty agent, list your license number and its expiration date
9. Do you have any outstanding State or Federal tax liens or warrants?
YESNO
10. Do you currently have any outstanding judgments for unpaid child support?
YESNO
NOTE: If you answered <u>YES</u> to any of the above, give a detailed explanation on an attached sheet.
<u>AFFIRMATION</u>
I AFFIRM, UNDER THE PENALTIES OF PERJURY AND THOSE PENALTIES SET OUT IN THE INDIANA CODE, TITLE 27, CHAPTER 10, THAT THE FORGOING ANSWERS AND INFORMATION ARE TRUE AND ACCURATE.
SIGNATURE OF APPLICANT:
DATE:
Sworn and subscribed before me this Day of,
My Commission Expires Notary Public
County of Residence Printed Name



INFORMATION FOR EXAMINER

Please provide the following information so that you are easily located for the exam of your bail bond records.

Business Name:				
Is your bail bond business: Full-Time Business Phone Number:		Part-Time		
		Email A		
Address where your re	cords are kept:			
Street Number	City	State	Zip Code	County
		•	such as a rural route from the nearest town	• •
		•		• •
P	lease give directio	ns to location	From the nearest town	1:
If you	lease give directio	ns to location	rom the nearest town	iness,
If you	have employme Where can you b	ns to location i	your bail bond bus	iness,
If you	have employme Where can you b	ns to location i	rom the nearest town	iness,
If you	have employme Where can you b	ns to location that other than be located dur	your bail bond bus	iness,

Please complete this form and return it with your bail agent license application.

Attach a small digital photo or email one	e to: <u>lreynolds(a)idoi.in.gov</u>
HERE→	
Your signature (PLEASE USE BLACK	SHARPIE PEN)
HERE→	
Name	Agent #
Address	
Phone Number	

Indiana Department of Insurance Bail Bond Division 311 West Washington Street, Suite 103 Indianapolis Indiana 46204-2787

License Requisition			Date				
	å	-					
Type or Print Neatly	Agent Data						
1. Name:							
Last	F	irst	Middle	Maiden			
2. Home Address:							
Street	t	City	State	Zip			
3. Business address:							
St	reet	City	State	Zip			
4. Home Telephone:	5. E	Business Telephone	:				
6. Social Security Number:	7. Date of Birth:						
8. Email Address							
I certify that I am familiar with the	policies and forms v	which I will be soli	citing for this comp	any.			
	Signature of Agent						
	Surety Insu	rance Compa	nv Data				
		O					
8. Name of Company:	·	_	•				
		_	•				
			•	Zip			
Street	City	St	ate	•			
9. Addresss:Street 10. Telephone Number:	City	St	ate I.D. Number				
9. Addresss:	City	St	ate / I.D. Number	· · · · · · · · · · · · · · · · · · ·			

Indiana Department of Insurance Bail/Recovery

Agent Licensing Examination

Performance Assessment Network (PAN) is the provider for testing services

Registering and Scheduling an Examination:

The following are the steps needed to register and schedule your Bail or Recovery Agent licensing examination.

Step 1: IDOI Testing Website

Login to the IDOI testing website: https://secure.vitapowered.com/idoi/login.screen

Step 2: Register for Account

Create an account by clicking on the "Applicant Registration" link.

Complete the registration form and click the continue button.

*Note: You must know your login ID and password when you arrive at the test center to take the exam.

Step 3: Login

Login to: https://secure.vitapowered.com/idoi/login.screen using the login ID and password created during the registration process.

Step 4: Select Examination

Select the licensing exam that matches your course certificate.

*Note: you must have your course certificate with you when you arrive at the test center to take the exam.

Step 5: Take Practice Examination

The practice assessment is a demo of the test system. The practice assessment does not contain actual exam content and is not scored. This step is simply to familiarize you with the testing system.

Step 6: Pay for Examination

Enter your credit/debit card information. You may use Visa, MasterCard or American Express to pay for your examination.

Step 7: Schedule for Examination

Select a date/time for the testing center of your choice. The testing centers closest to the address you entered during registration will be displayed. You may opt to see testing centers near a different zip code by entering that zip code at the bottom of the screen or you can see additional dates/times by clicking on the "More Times" link. If there are no available seats at the center of your choice, you may submit a Seat Request email.

*Note: Once your appointment has been scheduled, you will receive an email notification with the details of your appointment and instructions of what to bring.

Step 8: Take Examination

Please arrive at the test center 10 minutes prior to your appointment. You will need the following information:

- Login ID and Password
- 12 Hour PLE (Pre-License Education) Certificate
- Federal or State ID

Should you need any assistance, please email: IDOI Support@panpowered.com or call Tech Support: 877-449-8378

Frequently Asked Questions

WHEN WILL I GET MY RESULTS?

- You will get your results immediately after you have completed your examination.
- The proctor will print your results.

WHO DO I CONTACT IF I AM UNABLE TO SCHEDULE OR LOG ONTO THE SCHEDULING WEBSITE?

- Should you need any assistance, email: IDOI_Support@panpowered.com (or)
- Call Tech Support: 877-449-8378

WHAT IF I ARRIVE WITHOUT MY 12 HOUR PRE-LICENSE EDUCATION COURSE CERTIFICATE AND ID?

- You will not be permitted to test if you arrive without your 12 hour PLE (Pre-License Education Certificate).
- Login ID and password.
- Federal or state ID.

CAN I PAY WITH CASH OR CHECK?

- No
- Only credit or debit cards are accepted as payment.

WHAT IF I NEED TO RESCHEDULE MY APPOINTMENT?

- If you need to reschedule your appointment, do so immediately by logging in at: https://secure.vitapowered.com/idoi/login.screen.
- You will not be permitted to reschedule your appointment via the scheduling website within 24 hours of your appointment.
- If you are within 24 hours of your scheduled appointment and are unable to attend, you must call: 877-449-8378; however, you will have to pay the full exam amount again in order to reschedule.

I AM UNABLE TO TAKE THE PRACTICE EXAMINATION, WHAT CAN I DO?

- Email: IDOI_Support@panpowered.com (or)
- Call: Tech Support at 877-449-8378